

BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO.	FILING DATE				
						APPLICANT(S)					
CLAIMS											
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*		*		
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						51					
2						52					
3						53					3
4						54					4
5						55					5
6						56					6
7						57					7
8						58					8
9						59					9
10						60					10
11						61					11
12						62					12
13						63					13
14						64					14
15						65					15
16						66					16
17						67					17
18						68					18
19						69					19
20						70					20
21						71					21
22						72					22
23						73					23
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28						78					28
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31						81					31
32						82					32
33						83					33
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37						87					37
38						88					38
39						89					39
40						90					40
41						91					41
42						92					42
43						93					43
44						94					44
45						95					45
46						96					46
47						97					47
48						98					48
49						99					49
50						100					50
TOTAL IND.						TOTAL IND.					

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